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Available online at [www.sciencedirect.com](http://www.sciencedirect.com)**ScienceDirect**journal homepage: <http://www.elsevier.com/journals/international-journal-of-nursing-sciences/2352-0132>**Original Article****Factors influencing the occupational well-being of experienced nurses****Shangping Zhao<sup>a</sup>, Ling Liu<sup>b</sup>, Hong Chen<sup>a,\*</sup>**<sup>a</sup> Nursing Department, West China Hospital/West China School of Nursing, Chengdu, Sichuan 610041, PR China<sup>b</sup> Nursing Department of Tianjin Medical University, Tianjin 300070, PR China**ARTICLE INFO****Article history:**

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**ABSTRACT****Objectives:** To determine the factors influencing the occupational well-being of experienced nurses.**Methods:** We interviewed eight experienced nurses using an exploratory, semi-structured interview.**Results:** The interviews revealed five themes that influenced occupational well-being in experienced nurses: (1) external occupational recognition; (2) internal career expectation and occupational value; (3) work environment; (4) family support; and (5) occupational planning and payment. When the nurses were not recognized by patients or clients, their family, colleague and leaders, their well-being was negatively impacted. However, the harmonious work environments and friendly interpersonal relationships positively impacted their well-being.**Conclusion:** By identifying the factors that contribute to a nurse's occupational well-being, the nursing management is better able to address the nurse's needs to maintain a positive well-being. This in turn will decrease the burnout and increase retention of experienced nurses, which will raise the quality of patient care.Copyright © 2015, Chinese Nursing Association. Production and hosting by Elsevier (Singapore) Pte Ltd. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).**1. Introduction**

Since the advent of positive psychology, the well-being of a person has been frequently studied. The well-being of nurses has become a point of interest due to many nurses feeling stressed and burnout by their work. This has led to a nursing shortage and high job turnover. Occupational well-being is affected by several factors, including job satisfaction, motivation, self efficacy, achievement, deindividuation, physical and

psychological fatigue, environment, and organization identification [1–6]. When these factors are negatively affected, nurses frequently resign from their positions at hospitals [4,5,7]. A high prevalence of occupational burnout and job turnover exists in the nursing field and has had a serious impact on the quality of patient care [4,8–10]. It has been strongly suggested that improving staff well-being could enhance the patient experience [11]. Although measures have been taken to reduce job burnout of nurses, shortage and turnover of nurses were still the hard issue in many hospitals [2,12,13].

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Due to the low level of occupational well-being in nurses, we are interested in understanding what factors contribute to well-being in Chinese nurses, particularly in experienced nurses. Experienced nurses are the backbone of the entire nursing team at a hospital. Currently, limited information about occupational well-being of experienced nurses is known. By understanding how to improve the occupational well-being in experienced nurses, the quality of patient care could increase and job turnover could decrease.

## 2. Methods

### 2.1. Design

Individual interviews were conducted during the spring of 2013. The interviews were exploratory and semi-structured.

### 2.2. Participants

Eight nurses were selected from General Hospital of Tianjin Medical University, an academic teaching hospital in northern China. The nurses were from several departments including respiratory medicine, general surgery, nursing, cardiac, emergency, and endocrine. To be included in this study, nurses were required to have more than 10 years of work experience in a primary professional position, or more than 5 years of work experience in a medium or senior professional position. Participant demographics are shown in Table 1.

### 2.3. Procedures

All nurses were verbally informed prior to the interview that it was voluntary and confidential. Participants chose the time and place for the interview in order to make them feel comfortable. Immediately before the interview, each participant signed a written informed consent form. Each interview lasted between 20 min and 40 min. Approval to participate in the study was granted by the Tianjin University research ethics committee and the appropriate department and nursing ward managers.

### 2.4. Data collection

Interviews were audio recorded. ZHAO also recorded pauses, tone, facial expression, and gestures during the interview. The list of questions asked in each interview is outlined in Table 2. Interviews were conducted until data saturation (i.e. when no more new themes emerged from the interviews). Interviews were conducted in Mandarin and translated to English by ZHAO and CHEN.

### 2.5. Data analysis

ZHAO transcribed audio records verbatim within 24 h after the interview. The transcribed materials were checked for accuracy by each participant via e-mail. Using the Giorgi method with both manifest and latent analyses, the materials were read and reread to capture the essence of the text as a whole and identify the most prominent features (meaning units). The meaning units were sorted into categories. After finding patterns in the similarities and differences, subthemes emerged. Themes consolidated the subthemes with similar meanings. The interpretation of the interviews content and themes were reached by consensus.

## 3. Results

In this study eight female nurses from seven departments were interviewed on their occupational well-being. None of the participants were aware of this term before the interview. All of the participants were invested in their work and wanted to receive personal satisfaction through nursing. After analysis, the following five themes that affected their occupational well-being emerged: (1) external occupational recognition; (2) internal career expectation and occupational value; (3) work environment; (4) family support; and (5) occupational planning and payment.

### 3.1. External occupational recognition

“External occupational recognition represents recognition from other people except for nurse self. “Occupational recognition” was the most frequently used phrase from the transcribed interviews. The nurses felt satisfaction and happiness from their jobs when they received praise from family members, colleague, leaders, and especially patients. Likewise, when the nurses received disapproval from others, they were disappointed and discouraged. These short-term positive and negative feelings have a large impact on the nurse's long-term attitude towards their work. Hence, more recognition build a positive circle for occupational well-being, and more disapproval nurture a negative circle for job burnout. Some nurses stated that their job satisfaction has been hindered by the lack of respect they feel from their culture.

*F1: I feel gladness from my heart when patients applaud me for my work effort and thank me for what I have done for him. How could I not be happy when I am recognized like that!*

*F7: They [the public] could understand that nursing work also has some hardships. Recognition, not only from patients, but also*

**Table 1 – Participant demographics (n = 8)**

Items	Classifications	n
Gender	Female	8
Age (years)	31–35	3
	36–40	1
	>40	4
Working years in nursing	5–9	2
	10–14	2
	15–19	1
	>20	3
Educational level	College degree	2
	Bachelor degree	3
	Graduate degree	3
Marriage status	Married	8
Professional title	Primary	2
	Medium	5
	Senior	1

**Table 2 – Interview questions**

Number	Questions
1	Do you know what occupational well-being is? What are your thoughts on it?
2	How would you describe your occupational well-being? Describe your situation.
3	What factors, both positive and negative, have affected your occupational well-being?

colleagues and leaders, is an affirmation. It is disappointing and discouraging if you are misunderstood or disapproved by your patients, colleagues and leaders after you did your work carefully and laboriously. What I am dissatisfied with the job is that the public doesn't trust and respect us."

### 3.2. Internal career expectation and occupational value

Internal career expectation represents the expectation for nursing work by nurses self and also shows the direction and aim of work which nurse pursuit. Occupational well-being was affected by the nurse's expectation of their work. This expectation varied depending on what each participant valued. An appropriate expectation for work is an important factor in maintaining a positive occupational well-being. Moreover, all participants felt positively towards nursing.

F1: I think the responsibility to do nursing is fundamental. Occupational well-being depends on your expectation. If you do not have high expectations, then you can always have a positive well-being.

F4: Being a nurse is a kind and helpful job. It is to "Give people roses and leave fragrance on their fingers". This kind of attitude certainly will make you feel positively about your work ... Having a good state of mind is your treasure ... Once a patient was rescued by my immediate sputum suction ... I realized what I had done! We are saving a life! How great is this job! More so than in any other job, I felt happy. It was a kind and devotional action, no matter whether it was paid or not.

### 3.3. A harmonious and friendly work environment

All participants felt that they were in a harmonious and friendly work environment. This led them to feel like they belonged to the group and relieved the intensity of the medical environment. They also thought that the positive work environment made it easier to establish good nurse–patient relationship.

F2: The relationship between my colleagues and myself is quite perfect and united. We can feel the care from the leaders. We love to work here and feel happy in this aspect.

F4: I feel happy and flattered (smiling lightly) when lovely and appreciative patients write thank you letters or a patient's family member does a favor for me in some heavy job. Just respecting you and your job, and knowing what you have done is good for the patient.

### 3.4. Support and understanding from family

Without family support, the participants feel worried and distracted. All participants admitted that work-family conflict

existed to some degree. All participants are mothers. They reported that they felt guilty sometimes because they were absent during their child's growth and family activities.

F1: [My husband] supported my decision to work in the front line during the SARS epidemic in 2003 (pause) ... My time sharing was 80% to work and only 20% to family. Once I could not accompany my mother when she had surgery because I was working ... My child had a 38.8 °C fever but I still needed to work.

F5: My family understands my work. They will keep our home perfect and I don't need to worry about my child or my household ... what's more, they share what I have achieved. In that moment, I feel happy from both my job and my family.

### 3.5. Occupational planning and payment

The profession of nursing is growing and the career outlook is hopeful. The participants have experienced this growth, which has given them a better outlook on their future career. However, participants believe that their payment is inconsistent with their effort.

F2: Compared with nursing work before, I feel more positive. Nursing is easier work than in my younger days ... We are gradually getting recognized more by our colleagues and society ... But sometimes you work harder than others but get less, whether in professional title promotions or bonuses.

F7: I think we nurses do the heaviest job but get the least money.

## 4. Discussion

The most common factor affecting occupational well-being in the nurses interviewed was receiving recognition for their efforts. This study showed that even experienced nurses felt that they did not receive the recognition from their families and patients that they felt they deserved. This led to feelings of disappointment and dissatisfaction. Our finding was consistent with previous research. A study [14] about "80th" nurses found a positive correlation between occupational well-being and occupational recognition. Meaning that when a nurse's efforts are recognized by patients, family, colleagues and leaders, that nurse experiences an increase in occupational well-being and when a nurse's efforts are not recognized, that nurse experiences a decrease in occupational well-being [15]. It is also known that the occupational well-being of nurses is lower than the occupational well-being of doctors [16]. Lack of recognition causes nurses to experience more disappointment, fatigue, and job burnout [17,18]. By providing more recognition to nurses, the quality of patient care could be increased and job turnover could be decreased.

This study showed that the experienced nurses interviewed were passionate about their work and felt a strong responsibility towards the nursing profession. They understood the value of their work to their patients and the patients' families. These factors are important to decrease job turnover as a previous study found that nurses were more likely to stay at their job when they understood the value of their work than when they were offered a higher payment [19]. This finding indicates that educating nurses on the importance and value of their work is essential to retain them.

All participants had a harmonious work environment and friendly interpersonal relationships. Benevolent work relationships develop group cohesiveness, which benefits occupational well-being. Another study also found that strong interpersonal relationships among colleagues improved job satisfaction and retention of nurses [4]. Therefore, maintaining a positive physical and social environment of each hospital department should be a high priority for nursing managers.

Work-family conflict existed to some degree for all participants in this study. This conflict has affected their occupational well-being. This finding is consistent with a previous study that occupational well-being and job satisfaction are affected more by family relationships and marriage in female workers compared to their male counterparts [20]. The understanding and support of family members, especially a spouse, is crucial to decrease work-family conflict and the guilty feelings the participant may feel [21]. In addition, it is known that conflicts between work and family influence physical and mental health [22]. Therefore, family support is a vital factor impacting occupational well-being.

When a plan for career advancement is not in place, nurses can feel indifferent about working for that employer in the future. A nurse's occupational well-being can be improved by having a plan to provide professional growth to the nurse [23]. In addition, reasonable payment improves occupational well-being [24]. Nursing managers should establish and improve the professional title rating system and payment system to benefit their nurse's occupational well-being.

## 5. Conclusion

This study reported five factors influencing an experienced nurse's occupational well-being: (1) external occupational recognition; (2) internal career expectation and occupational value; (3) work environment; (4) family support; and (5) occupational planning and payment.

This study is a reminder that nursing management should prioritize occupational well-being. Nursing management should focus on providing guidance, support, and recognition to their nurses to improve occupational well-being. In addition, continuing to foster a friendly and supportive work environment will benefit their nurses. Considering the challenges health services are facing and the demand for qualified nurses, it is essential to promote the well-being of the experienced nurses in order to retain them. At an individual level, this study reminds nurses to cultivate positive values and family support, highlight their personal strengths to others, and foster healthy relationships with their colleagues. By ensuring that the nurse's have a positive well-being, the high

job turnover should be decreased and this will improve the quality of patient care.

## Author contributions

ZHAO conceived and designed the study, executed the interviews, and interpreted the data. LIU conceived the study, and interpreted the data, including quality control. CHEN interpreted the study. All authors contributed substantially to its revision. ZHAO takes responsibility for the paper as a whole.

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